UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATEMT				
1 Date of Request: 6/20/05 2 Se	erial/Patent # 10 500424			
3 Please refund the following fee(s):	4 PAPER 5 DATE NUMBER FILED 6 AMOUNT			
Filing	\$			
Amendment	\$			
Extension of Time	\$			
Notice of Appeal/Appeal	\$			
Petition	\$			
Issue	\$			
Cert of Correction/Terminal Disc	c. \$			
. Maintenance	\$			
Assignment	\$			
y other Claims	\$ 2070			
	7 TOTAL AMOUNT OF REFUND \$			
	a TO BE REFUNDED BY:			
10 REASON:	Treasury Check			
Overpayment	Credit Deposit A/C #:			
Duplicate Payment	9034-1721			
No Fee Due (Explanation):				
Ŷ				
11 REFUND REQUESTED BY:				
L	Hman TITLE: Paraless/			
SIGNATURES DOUBLE CULS	TITLE: Paraless! PHONE: 703-308-5140 X			
OFFICE:	000000000000000000000000000000000000000			
APPROVED:	DATE:			

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room \$92B

SEST AMAILABLE COPY

UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

, REQUEST FOR PAT	ent fee r	EFUND			
1 Date of Request: 6120105	2 Serial,	/Paten	e # 10/50	10424	
3 Please refund the following fee(Paper Number	5 DATE FILED	6 AMOUNT	
Filing				\$	
Amendment				\$	
m /Extension of Time				\$	
Notice of Appeal/Appeal				\$	
Petition				\$	
Issue				\$	
Cert of Correction/Terminal	Disc.			\$	
Maintenance /				\$	
Assignment				\$	
other Claims				\$ 2070	
		7 TOTAL AMOUNT OF REFUND		\$	
	8	TO BE	REFUNDED B	X:	
10 REASON:		Treasury Check			
Overpayment		Credit Deposit A/C #:			
/ Duplicate Payment	115	1 3/19 10 3 7- 1721			
No Fee Due (Explanation):			-		
) <u></u>					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: Darrell	Cuttno	<u> </u>	TITLE: PC	1961	
SIGNATURE / Mould Lut	25		PHONE: 703	-318-9,40 X	
OFFICE: \ \$		<u>សិសិសិសិសិ</u>)	*********	
APPROVED:		ATE:		<u>/ </u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance: Refund Branch
Crystal Park One, Room 202B